



Financial Aid
141 College Drive, Albemarle, NC 28001
Tel: (704) 991-0302 Fax: (704) 991-0160
financialaid@stanly.edu

Intent to Enroll Form

Student Name: _____ **ID Number:** _____

Students who have withdrawn from classes in the first 8 weeks and are still enrolled in late start classes must complete this form. The form must be completed and returned to the SCC Financial Aid Office or a Return to Title IV calculation will be performed, and the student may be deleted from the late start classes.

I, _____,
(Print Student's Name)

_____ . I understand that if I do not attend the class or classes, a
(Class start Month/Date)

Return to Title IV calculation will be performed, and I will be responsible for payment of any monies owed to the Department of Education.

Student Signature

Date